CERTIFICATE OF FACSIMILE

1 hereby certify that this correspondence is being deposited via facsimile to The Honorable Commissioner in the United States Patent and Trademark Office, Attention: Kamini S. Shah whose telephone number is (571) 272-2279 and centralized facsimite number is (703) 872-9308 on March 14.

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MAR 1 4 2005

7/14/as David H. Brightman, Reg. No. 40,532 Date

PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):

Makoto Murai

Serial No.:

09/982,743

Filed:

October 18, 2001

Confirmation No.: Group Art Unit:

7840

Examiner:

2142

Title:

Shah, Kamini S.

METUOD SOF

METHOD FOR PARTICIPATING IN NETWORK TYPE GAME,

SERVER SYSTEM FOR THE SAME, AND RECORDING MEDIUM

UPON WHICH PROGRAM FOR THE SAME IS RECORDED

Atty Docket:

SHG-027P2

Cincinnati, Ohlo 45202

March 14, 2005

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## **AMENDMENT**

Sir:

In response to the Office Action mailed on January 7, 2005, please

amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 10 of this paper.

Application No. 09/982,743
Amendment Dated 3/14/05
Reply to Office Action of 1/7/05

## Conclusion

In view of the foregoing response including the amendments and remarks, this application is submitted to be in complete condition for allowance and early notice to this affect is earnestly solicited. If there is any issue that remains which may be resolved by telephone conference, the Examiner is invited to contact the undersigned in order to resolve the same and expedite the allowance of this application.

Applicant does not believe that this response requires that any fees be submitted, however, if any fees are deemed necessary, these may be charged to Deposit Account No. 23-3000.

Respectfully submitted.

WOOD, HERRON & EVANS, L.L.P.

David H. Brinkman, Reg. No. 40,532

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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

**Application or Docket Number** 

SHG- 027. P2

		CLAIMS AS	(Column		(Column 2)			TYPE		OR SMALL ENTITY		
TOTAL CLAIMS			12				Γ	RATE	FEE ,	1	RATE.	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			17 minus 20=		•Ф			X\$ 9=.		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		* Ø			X42=		OR	X84=	
MUI	TIPLE DEPEN	DENT CLAIM PR	RESENT					+140=		OR	+280=	
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		(Column 1) CLAIMS			mn 2) . HEST	(Column 3)	-	SMALL C			SINALL	
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	Independent	•	Minus	***		=	$\  \ $	X42=		OR	X84=	
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(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIC NU PREV	HEST MBER /IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		1		
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